

# Alde Valley Academy

## WORK EXPERIENCE CONTACT DETAILS

### Students Details

Name	
Tutor Group	

### Company's details

Company Name	
Address	
Postcode	
Email	
Telephone Number	
Name of contact	
Type of work applied for	

### Parents to complete

How was this placement found?	
I agree to my child applying to this employer. Please consider Health & Safety and the level of care provided.	<i>Parental signature required</i>

**Please return this form to Miss Hinchliffe in the school office – thank you**

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### SCHOOL USE

Date email/letter sent to employer:

Date of any contact:

Accepted / Rejected